FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1 (See instructions)			Office use only		
1. NAME OF COMMITTEE (in			xample: If typying, type ver the lines	12FE4M5	
CME/PAC, CH	ICAGO MERCANTILE E	XÇHANGE INC	, PAC		
	20 SOUTH)	WACKER DRIV			
ADDRESS (number and	street)	WAOKEH DIIIV	<u> </u>		
(Check if addr	ess				
is changed)	CHICAGO			IL	
001441775505 144	W ADDD500	CITY	•	STATE▲ ZIP CODE ▲	
ibush@cme.co					
1					
COMMITTEE'S WEB	PAGE ADDRESS (URL)				
		1111			
COMMITTEE'S FAX N 3129303154	NUMBER				
2. DATE 0.2	09 / 200	7 ^Y			
3. FEC IDENTIFICA	ATION NUMBER	CC	00076299		
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)					
I certify that I have exam	ined this Statement and to the be	est of my knowledge	and belief it is true, correct ar	nd complete	
Type or Print Name of	Treasurer Mr. Ror	nald A. Pankau			
Type of Time Name of					
Signature of Treasurer	Electronically Filed by	/Ir. Ronald A. I	Pankau	Date 02 / DDD / YYYYY	
NOTE: Submission of fa			ct the person signing this Stat	tement to the penalties of 2 U.S.C. S437g. WITHIN 10 DAYS	
Office Use Only			For further information of Federal Election Commiss Toll Free 800-424-9530		

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5.	TYPE OF COMMITTEE (Check One)					
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)					
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete information below.)	the candidate				
	Name of Candidate					
	Candidate Party Affiliation Office Sought: House Senate President	State District				
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.					
	Name of Candidate					
	(National, State (or subordinate) committee of the	(Democratic, Republican,etc.) Party.				
	(e) This committee is a separate segregated fund					
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregation committee.	ited fund or party				
3 .	Name of Any Connected Organization or Affiliated Committee					
	Chicago Mercantile Exchange Inc.					
L						
	Mailing Address 20 South Wacker Drive					
	Chicago IIL IIL	60606				
	CITY▲ STATE▲	ZIP CODE				
	Relationship Connected					
	Type of Connected Organization:					
	X Corporation Corporation w/o Capital Stock Labor Orga	anization				
	Membership Organization Trade Association Cooperative	е				

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W	Vrite or Type Committee Nar				
	<u> </u>	O MERCANTILE EXCHANGE INC. PAG			
7.		ords: Identify by name, address, (phone number optional), and position of the person in ommittee books and records.			
	Full Name				
	Mailing Address	190 W. Thacker St.	190 W. Thacker St.		
		Hoffman Ests.		60194	
	Title or Position ♥	CITY A	STATE▲	ZIP CODE A	
	Manag 	er Gov. Relati	Telephone number	3031	
3.	Treasurer: List the na name and address of	ame and address (phone number option any designated agent (e.g., assistant tre	onal) of the treasurer of the comn easurer).	nittee; and the	
	Full Name of Treasurer Mr.	Ronald A. Pankau			
	Mailing Address	20 South Wacker Dri	ve		
		Chicago		60606	
	Title or Position ♥	CITY A	STATE ▲	ZIP CODE ▲	
Secretary Treasurer		ary Treasurer	Telephone number 312	930 3031	
	Full Name of Designated Agent				
	Mailing Address				
	Title or Position ▼	CITY A	STATE A	ZIP CODE A	

Telephone number

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9.	Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc.				
	Mailing Address	JPMorgan Chase 33 N. LaSalle St.			
		Chicago IL	60602 _		
		CITY A STATE A	ZIP CODE △		